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FEE TRANSMITTAL FOR FY 2009  Application dising small entity status. Set 37 CFR 1.27  Applicant John State Brown State Set 37 CFR 1.27  Applicant John State Brown State Set 37 CFR 1.27  And Linit NA  At Unit NA  Charge feets) Indicated below. except for the filling feet operated Accourt Name. Birch, Stewart Kolasch & Birch, LLP  Fee The Above-identified deposit account, the Director is hereby authorized to: (check all that apply)  Excended Accourt Name. Birch, Stewart Kolasch & Birch, LLP  Fee The Above-identified deposit account, the Director is hereby authorized to: (check all that apply)  At Charge feets) Indicated below. except for the filling feet Stewart Name. Birch, Stewart Kolasch & Birch, LLP  Fee Calculation Type Set Set Set Set Set Set Set Set Set Se	Order the Paperwork (Neddellor)	quired to respond to a c	Complete if Known				
FEE TRANSMITTAL For FY 2009  Applicant claims simal entity status. See 37 CFR 1.27  And Applicant claims simal entity status. See 37 CFR 1.27  Art Unit		). Application Nur	10,500,000,0,1,44,057				
For FY 2009    Applicant claims small entity sistus. See 37 CFR 1.27   Art Unit   NIX					)6		
Applicant daims small entity status. See 37 CFR 1.27  TOTAL AMOUNT OF PAYMENT  (5) 130.00  Attorney Docket No. 4731-0137PUS1  METHOD OF PAYMENT (check all that apply)  Check Credit Card Muney Order None Other (please identify):    Dopnisi Account Deposis Account Number			ventor M				
METHOD OF PAYMENT (check all that apply)    Check	For FY 20	Examiner Name			ed		
METHOD OF PAYMENT (check all that apply)  Check Credit Card Money Order None Other (please identify):  Ibxposit Account Number 02-2448 Deposit Account Number Octoor is hereby authorized for (check all that apply)  X Charge fee(s) indicated below Charge any additional fee(s) or underpayments of Charge fee(s) indicated below, except for the filing fee  X Charge fee(s) indicated below Charge any additional fee(s) or underpayments of Charge fee(s) indicated below, except for the filing fee  X Charge fee(s) indicated below, except for the filing fee  X Credit any overpayments  FEE CALCULATION  1. BASIC FILING, SEARCH, AND EXAMINATION FEES  FILING FEES  Small Entity  Application Type Fee (s)	Applicant claims small entity state	Art Unit	Ņ	N/A			
Check Credit Card Money Order None Other uplease identify:    X   Disposit Account Deposit Account Number   02-2448   Deposit Account Number   Birch, Stewart, Kolasch & Birch, LLP	TOTAL AMOUNT OF PAYMENT (S) 130.00		Attorney Docket	Attorney Docket No. 4731-0137PUS1		S1	
Deposit Account Deposit Account Number   Q2-2448   Deposit Account Name   Birch, Stewart, Kolasch & Birch, LLP	METHOD OF PAYMENT (check all that apply)						
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)    X   Charge fee(s) indicated below   Charge fee(s) indicated below, except for the filing fee   X   Charge fee(s) indicated below, except for the filing fee   X   Charge fee(s) indicated below, except for the filing fee   X   Charge fee(s) indicated below, except for the filing fee   X   Charge fee(s) indicated below, except for the filing fee   X   Credit any overpayments	Check Credit Card Money Order None Other (please identify):						
Charge fee(s) indicated below    Charge fee(s) indicated below, except for the filing fee	x Deposit Account Deposit Account Number 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP						
Credit any overpayments   X   Credit (S)   Cr	For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)						
Tee(s) under 37 CFR 1.16 and 1.17	x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee						
Application Type							
FILING FEES   Small Entity   Fee (\$)   Fee (	FEE CALCULATION						
Application Type	1. BASIC FILING, SEARCH, AND EXAMINATION FEES						
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Design   220	Application Type Fee (\$			Fee (\$)		Fees Paid (\$)	
Plant   220   110   330   165   170   85		· · · · · · · · · · · · · · · · · · ·		220	110		
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2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Each independent claim over 3 (including Reissues)  Multiple dependent claims  Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims  Total Claims Extra Claims Fee (\$) Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20.  Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) Fee Paid (\$)  HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1,52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof  Fee (\$) Fee Paid (\$)  Fee Paid (\$)	Reissue 330	165 54	0 270	650	325		
2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Each independent claims  Total Claims  Total Claims  Extra Claims  Fee (\$) Fee Paid (\$)  Multiple Dependent Claims  Total Claims  Extra Claims  Fee (\$) Fee Paid (\$)  Multiple Dependent Claims  Total Claims  Extra Claims Fee (\$) Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 3:  3 a 3 or HP = 0	Provisional 220	110	0 0	0	0		
Fee   S   S   S   S   S   S   S   S   S	2. EXCESS CLAIM FEES Small Entity						
Each independent claims over 3 (including Reissues)    Multiple dependent claims	Foo (\$\ Fee (\$)						
Multiple-dependent claims  Total Claims  Extra Claims   Fee (\$)   Fee Paid (\$)   Multiple Dependent Claims    11	Each claim over 20 (including Reissues) 52						
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3 - 3 or HP = 0 × 220.00 = 0.00  HP = highest number of independent claims paid for if greater than 3:  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1,52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets	HP ≈ highest number of total claims paid for, if greater than 20.						
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Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)  100 = /50 = (round up to a whole number) x =   4. OTHER FEE(S) Fees Paid (\$)  Non-English Specification. \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): 1251 Extension for response within first month 130.00  SUBMITTED BY/  Signature Registration No. (Altorney/Agent) 43,368 Telephone (703) 205-8000	listings under 37 CFR 1,52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50						
4. OTHER FEE(S)  Non-English Specification. \$130 fee (no small-entity-discount)  Other (e.g., late filing surcharge): 1251 Extension for response within first month  SUBMITTED BY  Signature  Registration No. (Alterney/Agent)  (703) 205-8000							
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						January 21, 2009	